

Fill in this information to identify the case:

Debtor name Elite Emergency Services, LLCUnited States Bankruptcy Court for the: Eastern District of Pennsylvania
(State)Case number (if known): 24-14370☐ Check if this is an amended filing**Official Form 206D****Schedule D: Creditors Who Have Claims Secured by Property**

12/15

Be as complete and accurate as possible.**1. Do any creditors have claims secured by debtor's property?**

- ☐ No. Check this box and submit page 1 of this form to the court with debtor's other schedules. Debtor has nothing else to report on this form.
- ☒ Yes. Fill in all of the information below.

Part 1: List Creditors Who Have Secured Claims**2. List in alphabetical order all creditors who have secured claims.** If a creditor has more than one secured claim, list the creditor separately for each claim.*Column A***Amount of claim**

Do not deduct the value of collateral.

*Column B***Value of collateral that supports this claim****2.1 Creditor's name**Ally**Describe debtor's property that is subject to a lien**2019 Ford F150\$28,503.00\$17,053.00**Creditor's mailing address**PO Box 380902**Describe the lien**Minneapolis, MN 55438**Is the creditor an insider or related party?**

- ☒ No
- ☐ Yes

Creditor's email address, if known**Is anyone else liable on this claim?**

- ☒ No
- ☐ Yes. Fill out Schedule H: Codebtors (Official Form 206H).

Date debt was incurred**Last 4 digits of account number** 1 0 9 6**As of the petition filing date, the claim is:**

Check all that apply.

- ☐ Contingent
- ☐ Unliquidated
- ☐ Disputed

Do multiple creditors have an interest in the same property?

- ☒ No
- ☐ Yes. Specify each creditor, including this creditor, and its relative priority.

3. Total of the dollar amounts from Part 1, Column A, including the amounts from the Additional Page, if any.\$28,503.00

Debtor Elite Emergency Services, LLC
Name

Case number (if known) 24-14370

Part 1: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

Column A

Amount of claim

Do not deduct the value of collateral.

Column B

Value of collateral that supports this claim

2.2 Creditor's name

Citizens Bank N.A.

Creditor's mailing address

1 Citizens Bank Way

JCA115

Johnston, RI 02919-1922

Creditor's email address, if known

Date debt was incurred

Last 4 digits of account number

____ _

Do multiple creditors have an interest in the same property?

☒ No

☐ Yes. Have you already specified the relative priority?

☐ No. Specify each creditor, including this creditor, and its relative priority.

☐ Yes. The relative priority of creditors is specified on lines _____

Describe debtor's property that is subject to a lien

Air Movers: 3 - Restore Dynamics X, Air Movers: 6 - X Power, Air Scrubber: 2 - Dri Eaz, Air Scrubber: Phoenix Guardian, Air Scrubbers: 10 - Alo Air 550, Air Scrubbers: 3 - Blu Dri, Dehumidifiers: 2 - Blu Dri, Dehumidifiers: 2 - Drie Eaz

Describe the lien

Is the creditor an insider or related party?

☒ No

☐ Yes

Is anyone else liable on this claim?

☒ No

☐ Yes. Fill out Schedule H: Codebtors (Official Form 206H).

As of the petition filing date, the claim is:

Check all that apply.

☐ Contingent

☐ Unliquidated

☐ Disputed

unknown

\$14,836.00